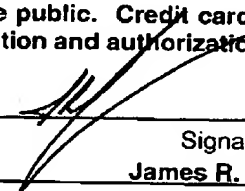


<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Attorney Docket No. 52493.000127
In re Application of	Stacy Rhea Steuart	
Application Number	09/788,646	
Filed	February 21, 2001	
For	SYSTEM AND METHOD FOR PROVIDING CUSTOMIZED SALES-RELATED DATA OVER A NETWORK	
Group Art Unit	3627	
Examiner	Oger G. Ade	
Confirmation No.	7075	
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate fee is as follows: *Please note: A Petition for a One Month Extension of Time was submitted with the response filed December 13, 2006.</p>		
	Large Entity	Small Entity
<input type="checkbox"/> One Month	\$120.00	\$ 60.00
<input checked="" type="checkbox"/> Two Month	\$ 460.00	\$ 230.00
<input type="checkbox"/> Three Month	\$1050.00	\$ 525.00
<input type="checkbox"/> Four Month	\$1,640.00	\$ 820.00
<input type="checkbox"/> Five Month	\$2,230.00	\$1,115.00
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0206.</p>		
I am the	<input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).;	
	<input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____	
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
May 27, 2008	 _____ Signature <b>James R. Miner</b> _____ Typed or Printed Name <b>40,444</b> _____ Registration Number (if applicable)	
Date		
Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
<input checked="" type="checkbox"/> *Total of <u>1</u> form(s) is/are submitted.		

05/28/2008 PCKOMP 00000068 09788646

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